

Florida Medicaid A Reference Guide

The Florida Agency for Health Care Administration is the chief health policy and planning group for the state and licenses and regulates health care facilities and health maintenance organizations (HMOs) in Florida. The Agency also manages the Medicaid program that provides health care to Florida's low-income and disabled citizens. The Agency's mission is better health care for all Floridians. As part of this mission, we publish the ***Consumer Awareness Series***, a variety of brochures to help the public make informed health care decisions.

This brochure provides general information about the Florida Medicaid program.

Note: This brochure is not designed to offer medical or legal advice. Please consult with your doctor for medical advice and an attorney for legal advice.

Information in this brochure is current as of April 2009.

The Florida Medicaid Program

The Florida Medicaid program provides medical coverage for Florida residents who meet the program's low-income eligibility requirement. This mostly includes children, pregnant women, disabled adults, and seniors.

Medicaid is different in every state. The federal government decides which services every state must offer and which services are not required, but may be offered if a state chooses.

Many Medicaid beneficiaries in Florida are enrolled in some form of health plan. Health plans provide coordinated care for beneficiaries. These plans include MediPass, health maintenance organizations (HMOs), provider service networks, and local provider organizations. Individuals choose among the health plans available in their area of the state and see health care providers who are a part of the plan.

When a person is approved for Medicaid he or she will need to do one of the following:

- Choose a Medicaid health plan by calling the Medicaid Options toll-free number (888) 367-6554 or TDD (800) 653-9803. For more information view the website www.MedicaidOptions.net. Medicaid beneficiaries who live in Baker, Broward, Clay, Duval, or Nassau County should call the Medicaid Choice Counseling toll-free number (866) 454-3959 or TDD (866) 467-4970 or view the website www.FLMedicaidReform.com.
- Beneficiaries who aren't required to enroll in a health plan can get services from any Medicaid-enrolled provider. If you are covered by regular Medicaid (not a health plan) you can find a Medicaid provider by contacting your local Medicaid office (see "AHCA's Medicaid Offices" in this brochure).

Medicaid Reform:

In July of 2006 the Florida Medicaid program began Medicaid Reform in Broward and Duval Counties. In July 2007 Medicaid Reform expanded to Baker, Clay, and Nassau counties and, with legislative approval, will expand statewide by 2011.

Under this reform program, Medicaid beneficiaries choose among the Medicaid health plans available in their county and the health plan provides coordinated health care.

Also under Medicaid Reform:

- Individuals can earn credits through the Enhanced Benefits Rewards Program for taking part in behaviors that can improve health. These credits can be used to buy over-the-counter, Agency approved, health related items at the pharmacy. To learn more call the toll-free number (866) 421-8474 or view the website http://ahca.MyFlorida.com/Medicaid/Enhanced_Benefits.

- Medicaid beneficiaries who can get private insurance can choose to “opt-out” of Medicaid, with Medicaid paying a certain amount towards the cost of an employer-sponsored health insurance plan or an individual health plan.

Information on Medicaid Reform, including who is required to enroll in a health plan and health plan choices available in the counties covered by Medicaid Reform (Baker, Broward, Clay, Duval, and Nassau Counties) can be found at www.FLMedicaidReform.com or by calling the toll-free number (866) 454-3959 or TDD (866) 467-4970.

Responsibilities of Government Agencies:

In Florida, the Agency for Health Care Administration operates the Medicaid program while the Department of Children and Families determines who is eligible for Medicaid.

In addition, the Social Security Administration determines eligibility for Supplemental Security Income (SSI is a federal program for aged, blind, and disabled persons with little or no income). In Florida SSI participants are automatically eligible for Medicaid.

For more information on eligibility for these programs, contact the Department of Children and Families or the Social Security Administration (See the “Resource Directory” in this brochure).

The Agency for Health Care Administration has Area Offices throughout the state to serve Medicaid beneficiaries and providers. These Area Offices:

- Provide consumer education and assistance
- Provide a list of primary care doctors, dentists, and specialists who serve Medicaid beneficiaries
- Answer questions about Medicaid services and help beneficiaries with MediPass and other Medicaid health plans
- Manage the Child Health Check-Up program and authorize emergency out-of-state transportation services, and
- For Medicaid health care providers, the Area Offices conduct credentialing site visits, assist with provider enrollment/re-enrollment, answer telephone and e-mail questions about billing and policy issues, resolve exceptional claims, and offer provider training on a variety of topics.

To find the Area Office in your part of the state see the “AHCA’s Medicaid Offices” section in this brochure.

Other government agencies that provide Medicaid related services include the Florida Department of Elder Affairs (CARES and Medicaid waiver programs for the elderly), County Health Departments (some direct medical care), and the Florida KidCare Program (insurance coverage for children). See the “Resource Directory” in this brochure for contact information.

Medical Services Covered by Florida Medicaid

Florida Medicaid covers a variety of medical services. The type and amount of services depends on the age of the beneficiary, the type of Medicaid program in which the beneficiary is enrolled, and the type of services determined medically necessary.

Medicaid services may include: a doctor, hospital, family planning (birth control, pregnancy and birth care), home health care, nursing home, hospice, transportation, dental and visual, community behavioral health, services through the Child Health Check-Up program, and other types of services.

The Florida Medicaid program pays the cost of prescription drugs for those who qualify for this coverage. However, if you are covered by both Medicaid and Medicare, most of your prescription drugs may be provided under the Medicare Part D Prescription Drug benefit or by a combination of Medicare and Medicaid.

Medicare Part D is an insurance benefit to help people with Medicare pay for prescription drugs and is provided through Medicare approved private health plans. For more information contact Medicare (See the “Resource Directory” in this brochure). Ask about the Medicare Part D plans for Florida Medicaid beneficiaries.

More information about Florida Medicaid services and the programs providing these services can be found in the publication, “Florida Medicaid Summary of Services.” This can be viewed at <http://ahca.MyFlorida.com/Medicaid/FLMedicaid.shtml> or call the toll-free number (888) 419-3456 to request a copy.

You can also call your local Medicaid office for information and questions about Medicaid services. See “AHCA’s Medicaid Offices” in this brochure for the office that serves your area of the state.

Medicaid and Medicare

Medicaid and Medicare are two separate programs. Medicaid is a program for people with low income who meet certain eligibility requirements and programs can be different in each state. Medicare is a federal health insurance program for people who are age 65 or older, disabled persons, or those with end-stage kidney disease. Medicare eligibility is not based on income and basic coverage is the same in each state.

If you have questions about Medicare, call the toll-free number (800) 633-4227 or TTY (877) 486-2048 or view the website www.Medicare.gov.

Medicaid and Medicare Can Work Together:

If you are covered by both Medicare and Medicaid, the Florida Medicaid program may cover:

- Your Medicare deductible (what you pay before Medicare starts to pay for covered services)
- Part of your Medicare co-payment and co-insurance (the cost you share with Medicare for some covered services)
- Premiums you pay for Medicare coverage
- Part of the cost of some services or items Medicare does not cover

If you receive Medicare only, you may still be eligible to get help from Florida Medicaid to cover the above expenses. These benefits are offered through the following programs: Qualified Medicare Beneficiaries (QMB), Qualifying Individuals 1 (formerly Part B Medicare Only), and Special Low-Income Medicare Beneficiaries (SLMB). To apply for one of these programs or for more information, contact the Department of Children and Families (See the “Resource Directory” in this brochure).

Frequently Asked Questions

Who is eligible for Florida Medicaid?

The following people may qualify for Florida Medicaid if they meet certain financial requirements:

- Low-income families with children
- Pregnant women
- Infants and children under the age of 21
- People who receive Supplemental Security Income (SSI)
- People who are aged 65 or older
- People who are blind or expected to be disabled for at least a year
- Non-citizens with medical emergencies
- Individuals who are medically needy

Who are Medically Needy beneficiaries?

People who have large monthly medical bills may be able to get some help with medical expenses through Medicaid even if their income and resources are higher than the requirements for Florida Medicaid eligibility.

These Medicaid beneficiaries may have to pay a part of their monthly medical costs before Florida Medicaid will cover the rest of their medical bills. This is called “share of cost.” The amount of the share depends on the patient’s monthly income and medical expenses. Medicaid eligibility for Medically Needy beneficiaries is evaluated every month.

Do I have to live in Florida a certain amount of time before I can apply?

It is not necessary to have lived in Florida for a certain length of time, but you need to be a resident of Florida. If you just moved to Florida and were covered by Medicaid in another state, you will still need to apply for Medicaid in Florida. However, if you receive Supplemental Security Income (SSI) you can simply contact the Social Security Office to report your new address.

How do I apply for Medicaid?

Applications for Medicaid are made through the Florida Department of Children and Families (DCF). Applications are available on-line at www.MyFlorida.com/cf_web or by calling the DCF toll-free number (866) 762-2237.

What documents will I need when I apply for Medicaid?

When you apply for Medicaid, you must fill out an application form. Also, you will need to submit information about the following:

- For each person you are applying for: name, date of birth, Social Security number, and where they were born
- Household expenses: rent, mortgage, utilities
- Vehicles
- Bank accounts, savings bonds, cash on hand
- Income from a job, child support, Social Security, etc.
- Other information as requested

Can I get Medicaid if I have a car, a house, and some savings?

Having a car, house, and some savings, within certain limits, does not prevent you from getting Medicaid.

How long will it take to decide my Medicaid eligibility?

After you complete your application, the Department of Children and Families must decide within 45 days if you are eligible to receive Medicaid. If you are disabled, the limit for deciding eligibility is 90 days. If you disagree with the decision, you may ask for a hearing.

If you are approved for Medicaid it can take two to three weeks to receive your Medicaid card. If you need proof of Medicaid eligibility right away, you can print a temporary card at www.MyFlorida.com/accessflorida.

When does my Medicaid coverage begin and end?

If you request retroactive coverage during your application process and meet all Medicaid requirements, your bills for the three months before the date of your application may be covered. Coverage usually ends at the end of the month you no longer meet Medicaid eligibility requirements.

For individuals in the Medically Needy Program, coverage begins on the day the individual meets his or her share of cost, and continues through the end of that month. Eligibility for coverage under the Medically Needy Program is determined each month a beneficiary presents an unpaid medical bill.

How do I find a Medicaid health care provider?

If you are covered by regular Medicaid contact your local Medicaid office for a list of primary care doctors, dentists, and specialists (See “AHCA’s Medicaid Offices” in this brochure).

If you are in a Medicaid health plan contact the plan for a list of Medicaid providers. Call the health plan customer service number listed on your medical card or other paperwork the health plan gave you.

To see a medical specialist, a dentist, or to receive certain services you may be required to ask your primary care doctor for a referral.

To make an appointment with a Medicaid provider you need to contact the doctor’s office and ask if they are accepting new Medicaid patients. Doctors, medical specialists, and dentists who serve Medicaid patients might serve only a certain number of patients at a time.

What are co-payments and co-insurance?

Co-payments and co-insurance are amounts of money you pay directly to the provider for the service you receive. Medicaid beneficiaries are required to pay a co-payment and co-insurance for certain services, unless they are exempted. Contact your local Medicaid office for more information (See “AHCA’s Medicaid Offices” in this brochure).

Where can I report possible Medicaid fraud or abuse?

If you suspect Medicaid fraud or abuse, please call the toll-free number (888) 419-3456.

What if I do not qualify for Medicaid but I need medical help?

Try calling the phone number 2-1-1. This is a community referral service which lists programs in a community that serve people in need. This number is slowly being introduced throughout Florida.

Check the website www.FloridaHealthFinder.gov (click Medical Help Resources) for a list of groups and programs that provide information, referral, or help with the cost of medical care and other expenses.

Check the website <http://ask.hrsa.gov/pc> to find a clinic in your community that provides health care services, even if you don't have insurance or money.

Contact your local county health department to see if you qualify for direct medical care or for information on other programs that may be available in your community. To find your local office, check the phonebook or visit www.FloridasHealth.com.

If you have uninsured children under the age of 19, you may be able to get them health insurance coverage through the Florida KidCare Program. Visit www.FloridaKidCare.org or call the toll-free number (888) 540-5437 or TTY (877) 316-8748.

If you are a senior, call the Florida Department of Elder Affairs toll-free number (800) 963-5337 or TDD (800) 955-8771 to ask about their programs and for referral to other programs that might be able to help.

AHCA's Medicaid Offices

Look for your county in the following list, to find the office which serves your area of the state. Contact the office for information on Medicaid services, a list of Medicaid providers, Medicaid health plans, consumer education, and information for Medicaid providers. For e-mail contact to a local Medicaid office, go to www.FloridaHealthFinder.gov and click "Find Doctors and Specialists."

To apply for Medicaid see the Department of Children and Families in the "Resource Directory" of this brochure.

Area 1

Escambia, Okaloosa, Santa Rosa, and Walton

(850) 595-5700

(800) 303-2422 (toll free)

Area 2a

Bay: (850) 872-7690

Franklin, Gulf, Holmes, Jackson, and Washington:
(800) 226-7690 (toll free)

Area 2b

Calhoun, Gadsden, Jefferson, Leon, Madison, and Wakulla
(850) 921-8474
Liberty and Taylor (800) 248-2243 (toll free)

Area 3a

Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, and Union
(386) 418-5350
(800) 803-3245 (toll free)

Area 3b

Citrus, Hernando, Lake, Marion, and Sumter
(352) 732-1349
(877) 724-2358 (toll-free)

Area 4

Baker, Clay, Duval, Flagler, Nassau, St. Johns, and Volusia
(904) 353-2100
(800) 273-5880 (toll free)

Area 5

Pasco and Pinellas
(727) 552-1191
(800) 299-4844 (toll free)

Area 6

Hardee, Highlands, Hillsborough, Manatee, and Polk
(813) 871-7600
(800) 226-2316 (toll free)

Area 7

Brevard, Orange, Osceola, and Seminole
(407) 317-7851
(877) 254-1055 (toll free)

Area 8

Charlotte, Collier, DeSoto, Glades, Hendry, Lee, and Sarasota
(239) 338-2620
(800) 226-6735 (toll free)

Area 9

Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie

(561) 616-5255
(800) 226-5082 (toll free)

Area 10

Broward

(954) 202-3200
(866) 875-9131 (toll free)

Area 11

Miami-Dade and Monroe

(305) 499-2000
(800) 953-0555 (toll free)

Resource Directory

Florida Agency for Health Care Administration

<http://ahca.MyFlorida.com>, www.FloridaHealthFinder.gov, www.MyFloridaRx.com
(888) 419-3456

Florida Department of Children and Families

www.MyFlorida.com/cf_web
(866) 762-2237

Florida Department of Elder Affairs

<http://ElderAffairs.state.fl.us>
(800) 963-5337
(800) 955-8771 (TDD)

Florida Department of Health

County Health Departments
www.FloridasHealth.com

Florida KidCare

www.FloridaKidCare.org
(888) 540-5437
(877) 316-8748 (TTY)

Medicare

www.Medicare.gov
(800) 633-4227
(877) 486-2048 (TTY)

Social Security Administration

www.ssa.gov
(800) 772-1213
(800) 325-0778 (TTY)

Additional consumer brochures include:

- A Consumer's Guide to Health and Human Services Programs
- A Patient's Guide to a Hospital Stay
- Assisted Living in Florida
- Emergency Medical Care
- End-of-Life Issues – A Practical Planning Guide
- Health Care Advance Directives (available only online)
- Home Health Care in Florida
- Long-Term Care
- Patient Safety
- Understanding Prescription Drug Costs

For additional copies of this brochure, or others in the series, please contact the AHCA Call Center's toll-free number (888) 419-3456. To view or print any brochure in the *Consumer Awareness Series*, please visit www.FloridaHealthFinder.gov.

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If you have comments or suggestions, please call (850) 922-5771.

The Agency for Health Care Administration created the following websites to help Florida residents be well informed health care consumers.

www.FloridaHealthFinder.gov

This website provides tools to compare hospitals, ambulatory surgery centers, emergency rooms, hospices, health plans, and nursing homes. The site includes the A.D.A.M. Health Encyclopedia with thousands of articles and illustrations. The site also provides a list of health care facilities; information on insurance, medications, seniors, medical conditions, and resources for the uninsured; consumer publications; information for health care professionals; and much more.

www.MyFloridaRx.com

This website compares prices for the most commonly used prescription drugs in Florida.

<http://ahca.MyFlorida.com>

This website includes information on health care facility regulation and licensing, the Florida Medicaid program, managed care (HMOs), and other topics related to the Agency for Health Care Administration.